

Lansing Police Department

120 West Michigan Avenue Lansing, MI 48933 Phone: (517) 483-4680

Fax: (517) 483-4688



Mike Yankowski, Chief

RIDE-ALONG OBSERVER APPLICATION FORM

THE RIDE-ALONG PROGRAM IS DESIGNED FOR LANSING RESIDENTS AND THOSE SEEKING LPD EMPLOYMENT. RESIDENTS MAY RIDE ONCE EVERY SIX MONTHS. RIDE-ALONGS ARE SCHEDULED FOUR HOURS IN DURATION.

By completing and signing this application, the applicant agrees to the following.

- A "Waiver of Liability" must be signed prior to participation in the Ride-Along Program. 1.
- 2. Persons under the age of 18 must have written parental or legal guardian endorsement in addition to the "Waiver of Liability" prior to participation.
- 3. Disclosure of any medical, mental, or emotional condition that could be compromised by participation.
- 4. The observation ride may be terminated by the officer at any time due to unusual or hazardous duty conditions or to misconduct on the part of the observer.
- 5. The observer may request termination of the observation ride at any time. The officer will honor the request as soon as possible.
- 6. No firearms or other weapons, including mace/pepper spray, may be carried by an observer, with the exception of sworn or LEOSA Certified observers.
- 7. Observers are prohibited from taking any cell phone or other digital photos/videos.
- The observer's dress must be in good taste, consistent with community standards, business casual. 8.
- 9. For their own safety, observers must comply with the directions of the officer and are discouraged from entering into, handling, or otherwise engaging known hazardous situations.
- 10. The observer understands that certain information obtained during the ride along may be sensitive or highly confidential and agrees not to share outside of this experience.
- 11. Observers may be subpoenaed to court to testify as a res gestae witness regarding observations at particular incidents.
- 12. Family members wishing to ride with an officer MUST HAVE PRIOR WRITTEN AUTHORITY FROM A PATROL LIEUTENANT.

First Name:	Last Name:
Address:	E-Mail:
Driver's License: State:	Date of Birth:
Home Phone: Cell	Phone:
I have read and agree to comply with the rules applicable to the Ride-Along Observer Program.	
DATE: Signature:	
"For Staff Purposes Only"	
Ride-Along Assignment SHIFT:	DATE/TIME:



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RIDE-ALONG OBSERVER

WAIVER OF LIABILITY AND COVENANT NOT TO SUE

I have asked to be allowed to accompany Lansing Police Officers in the course of their duties and to ride in a vehicle operated by an Officer of the Lansing Police Department.

I hereby agree, both on my own behalf and on behalf of my heirs and assigns, that the City of Lansing, its Employees, Agents, and Sureties will not be held, in any way, for any loss, injury, exposure to communicable diseases, or other damage to me or to my property which may occur as a result of or in the course of my accompaniment of Lansing Police Officers in the course of their duties or my presence in a Lansing Police vehicle due to any cause including negligent act or failure to act by a member of the Lansing Police Department or any other person. I also agree on my own behalf and on behalf of my heirs and assigns that I will not sue the City of Lansing or any of its Employees, Agents, or Sureties for any such loss, injury, or damage to me or my property arising from my presence in a Lansing Police Department vehicle and with Lansing Police Department Officers during the course of their duties.

I understand that the work of the Lansing Police Department may, at times, be dangerous and that by accompanying Lansing Police Department Officers as a "Ride-Along" guest, I may be exposing myself and my property to significant danger, injury, damage, or other loss. I also understand that this may include and exposure to blood, bodily fluids, communicable disease, or other potential biohazard. I also understand that I am being allowed to accompany Lansing Police Department Officers in the course of their duties and ride in a Lansing Police Department vehicle strictly as a guest and observer and that I am not to be involved in their duties in any way at any time unless specifically requested by them. I also agree to follow any directions from the Officer relating to the use of any cleansing agents or decontamination procedures. I agree to defend, indemnify, and hold harmless the City of Lansing, its Officers, Agents, and Employees, against any and all suits or claims for damages and/or losses incurred while accompanying Lansing Police Department Officers in the course of their duties and while riding in a Lansing Police Department vehicle as a guest in the "Ride-Along" program. I further agree to waive any liability or cause of action against the City of Lansing on behalf of myself, my heirs, successors, assigns, attorneys, and insurers.

I HAVE FULLY READ AND UNDERSTAND THE CONTENTS OF THIS WAIVER OF LIABILITY AND COVENANT NOT TO SUE AND UNDERSTAND THAT BY PLACING MY SIGNATURE BELOW I AM AGREEING TO ITS TERMS.

WITNESS:	DATE:
SIGNATURE OF RIDE-ALONG GUEST:	
SIGNATURE OF PARENT OR GUARDIAN: _ (If Guest is under 18 years of age)	

If the Ride-Along Guest is under eighteen (18) years of age, this Waiver of Liability and Covenant Not to Sue must be signed by the Ride-Along Guest's parent or guardian.